

ISSUE SLIP STAPLE AREA (for additional cross references)

POST	INITIALS	ID NO.	DATE
FEE DETERMINATION	JM		08-29-01
O.I.P.E. CLASSIFIER		49	9/7/01
FORMALITY REVIEW	TR	561119	9-27-01
RESPONSE FORMALITY REVIEW	T2	947	01/04/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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41	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
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100	✓

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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